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United States Bankruptcy Court
of the
Northern District Of Illinois
Western Division

Trustee's Final Report

In Re: EBONY B. PEARSON
2511 KNIGHT AVENUE
ROCKFORD, IL 61101

SSN-xxx-xx-4780

Case Number: 04-72912

Case filed on: 6/3/2004
Plan Confirmed on: 8/6/2004

P Discharged Paid Out

Total funds received and disbursed pursuant to the plan: \$2,737.50

Detail of Disbursements below:

Claim #	Name of the Claimant	Claimed by the Creditor	Allowed by the Court	Principal Paid	Interest Paid
772	CLERK OF U.S. BANKRUPTCY COURT	164.00	164.00	164.00	0.00
	Total Administration	164.00	164.00	164.00	0.00
000	BALSLEY & DAHLBERG LLP	1,200.00	1,200.00	1,200.00	0.00
	Total Legal	1,200.00	1,200.00	1,200.00	0.00
999	EBONY B. PEARSON	0.00	0.00	37.50	0.00
	Total Debtor Refund	0.00	0.00	37.50	0.00
001	ADVANTAGE PAGING	45.95	45.95	3.79	0.00
002	BANK ONE	0.00	0.00	0.00	0.00
003	CITY OF ROCKFORD	0.00	0.00	0.00	0.00
004	COLEMAN MD GLENNETTA	0.00	0.00	0.00	0.00
005	COMED CO	960.59	960.59	79.15	0.00
006	CREDIT PROTECTION ASSOCIATION	0.00	0.00	0.00	0.00
007	FINANCE AMERICA CORP.	1,500.00	1,500.00	123.59	0.00
008	HARVARD COLLECTION SERVICES, INC.	0.00	0.00	0.00	0.00
009	ROCKFORD MERCANTILE AGENCY INC	102.98	102.98	8.48	0.00
010	K.C.A. FINANCIAL	0.00	0.00	0.00	0.00
011	MCI	0.00	0.00	0.00	0.00
012	MEDICAL ACCOUNTS RECEIVABLE	0.00	0.00	0.00	0.00
013	NICOR GAS	1,074.30	1,074.30	88.52	0.00
014	ROCKFORD ASSOCIATED PATHOLOGISTS	0.00	0.00	0.00	0.00
015	ROCKFORD HEALTH SYSTEMS/	63.00	63.00	5.19	0.00
016	ROCKFORD HEALTH SYSTEMS/	0.00	0.00	0.00	0.00
017	ROCKFORD HEALTH SYSTEMS/	0.00	0.00	0.00	0.00
018	ROCKFORD RADIOLOGY	0.00	0.00	0.00	0.00
019	SBC CORPORATION	0.00	0.00	0.00	0.00
020	STATE COLLECTION SERVICE INC	264.32	264.32	21.78	0.00
021	STATE FARM INSURANCE	7,698.25	7,698.25	634.27	0.00
022	SUPERIOR RECOVERY SYSTEM	0.00	0.00	0.00	0.00
023	SWEDISH AMERICAN HOSPITAL	0.00	0.00	0.00	0.00
024	WINNEBAGO COUNTY CIRCUIT CLERK	737.00	737.00	60.72	0.00
025	ROCKFORD MERCANTILE AGENCY INC	1,585.66	1,585.66	130.64	0.00
	Total Unsecured	14,032.05	14,032.05	1,156.13	0.00
	Grand Total:	15,396.05	15,396.05	2,557.63	0.00

Total Paid Claimant: \$2,557.63
Trustee Allowance: \$179.87
Percent Paid Unsecured: 8.24

Wherefore, your petitioner prays that a final Decree be entered discharging the trustee and the trustee's surety from any and all liability on account of the within proceedings, and closing the estate, and for such other relief as is just. Pursuant to FRBP, I hereby certify that the subject case has been fully administered.

Report Dated:

/s/ Lydia S. Meyer
Lydia S. Meyer, Trustee

This is to certify that a copy of this notice has been mailed to the debtor and the debtor's attorney.

Dated at Rockford, IL on 11/01/2007

By /s/Heather M. Fagan